

## TITLE 760 DEPARTMENT OF INSURANCE

### **Final Rule** LSA Document #05-26

#### DIGEST

Adds 760 IAC 1-71 regarding the costs that can be charged for providing copies of medical records.  
*NOTE: LSA Document #05-26, printed at 28 IR 2456, was resubmitted for publication. Effective 30 days after filing with the secretary of state.*

#### **760 IAC 1-71**

SECTION 1. 760 IAC 1-71 IS ADDED TO READ AS FOLLOWS:

##### **Rule 71. Copies of Medical Records**

##### **760 IAC 1-71-1 Applicability and scope**

**Authority:** IC 16-39-9-4

**Affected:** IC 16-39

**Sec. 1. This rule applies to all providers and medical records companies.** *(Department of Insurance; 760 IAC 1-71-1)*

##### **760 IAC 1-71-2 Definitions**

**Authority:** IC 16-39-9-4

**Affected:** IC 16-18-2-295; IC 16-39

**Sec. 2. The following definitions apply throughout this rule:**

(1) “Medical records company” means a company that contracts with providers to make copies of patient medical records.

(2) “Provider” has the meaning set forth in IC 16-18-2-295.

*(Department of Insurance; 760 IAC 1-71-2)*

##### **760 IAC 1-71-3 General requirements**

**Authority:** IC 16-39-9-4

**Affected:** IC 16-39

**Sec. 3. (a) A provider or medical records company that receives a request for a copy of a patient’s medical record shall charge not more than the following:**

(1) One dollar (\$1) per page for the first ten (10) pages.

(2) Fifty cents (\$.50) per page for pages eleven (11) through fifty (50).

(3) Twenty-five cents (\$.25) per page for pages fifty-one (51) and higher.

(b) The provider or the medical records company may collect a labor fee not to exceed twenty dollars (\$20). If the provider or medical records company collects a labor fee, the provider or medical records company may not charge for making and providing copies of the first ten (10) pages of a medical record.

(c) The provider or medical records company may charge the actual costs of mailing the medical record.

(d) The provider or the medical records company may collect an additional ten dollars (\$10) if

the request is for copies to be provided within two (2) working days.

(e) The provider or medical records company may collect a charge not to exceed twenty dollars (\$20) for certifying a patient's medical record. *(Department of Insurance; 760 IAC 1-71-3)*

**760 IAC 1-71-4 Waiver of charges**

**Authority:** IC 16-39-9-4

**Affected:** IC 16-39

**Sec. 4.** A provider or a medical records company shall consider waiving or reducing the charges for copies of a patient's medical record under the following situations:

(1) A request from a provider:

(A) to whom the patient was referred for treatment; or

(B) from whom the patient is seeking a second opinion.

(2) The patient requested the records for his or her own use, and the charges will cause an undue financial hardship upon the patient.

*(Department of Insurance; 760 IAC 1-71-4)*